



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – John M. Colmers, Secretary

JAN 11 2011

The Honorable Edward J. Kasemeyer
Acting Chairman
Senate Budget and Taxation Committee
3 West Miller Senate Office Bldg.
Annapolis, MD 21401-1991

The Honorable Norman H. Conway
Chairman
House Appropriations Committee
121 House Office Bldg.
Annapolis, MD 21401-1991

The Honorable Thomas M. Middleton
Chairman
Senate Finance Committee
3 East Miller Senate Office Bldg.
Annapolis, MD 21401-1991

The Honorable Peter A. Hammen
Chairman
House Health and Government
Operations Committee
241 House Office Bldg.
Annapolis, MD 21401-1991

RE: SB 302/HB 325 (Ch. 542/543 of the Acts of 2007) and HG §15-144 – Department of Health and Mental Hygiene – Money Follows the Person Grant – Report

Dear Chairmen Kasemeyer, Middleton, Conway and Hammen:

The Department of Health and Mental Hygiene is required by SB 302/HB 325 (Ch. 542 and 543 of the Acts of 2007) to report annually on the status of the Money Follows the Person (MFP) Grant. The first report, submitted in January 2009, outlined the Department's initial efforts in implementing the activities related to the MFP Grant. It included: an update on communications with the Centers for Medicare and Medicaid Services (CMS) related to the grant, information on funding received from CMS under the grant, the number of individuals moved out of institutions under the grant, by the type of institution, and any plans or policies developed by the Department to move individuals out of institutional settings. The following is an update of the Department's MFP Grant activities through November 2010.

The Department received formal approval of the State's Money Follows the Person (MFP) Operational Protocol on March 6, 2008 with an effective date of February 6, 2008. The total grant award through calendar year 2010 is \$33,442,278. The majority of MFP grant award funds are provided to support an enhanced federal match (75% FFP) for home and community-based services for MFP program enrollees. The enhanced match leads to "savings" over the service costs that the State would have incurred without the enhanced federal match. The MFP Grant obligates the State to spend the "savings" toward meeting the federally established, State-directed goals of the MFP demonstration. The activities funded with the savings include: peer outreach; program education; application assistance; enhanced transitional case management for nursing facility residents; peer and family mentoring; the expansion of the Maryland Access

Point initiative; development of a statewide MAP resource website; resource coordination and provider incentives to serve individuals with brain injury; and provider training.

The MFP program staff within DHMH regularly communicate with the State's MFP Project Officer at CMS. The MFP Stakeholder Advisory Group which is composed of State staff, consumers, providers, and advocates has met monthly since 2008, moved to quarterly meetings in August 2009, and resumed monthly meetings in August of 2010.

The first MFP participant moved to a community residence on March 18, 2008. Since then, 746 individuals have transitioned to the community from institutions, including 611 individuals from nursing facilities, 119 individuals from State Residential Centers (with 108 from Rosewood) and 16 individuals from chronic hospitals, through the end of November 2010.

During the past year, the Department has continued its work to implement the plans laid out in the approved Operational Protocol. The MFP Grant brought with it significant reporting requirements that required changes to the MMIS system, modifications to several Medicaid waiver tracking systems, and the development of an MFP web-based tracking system. The Department has added services to the Living at Home and Older Adults waivers in order to improve the package of services available to those transitioning out of nursing facilities.

Through the MFP demonstration, the Department has conducted face-to-face outreach visits with more than 14,000 institutional residents including 13,750 nursing facility residents, provided options counseling 2,873 times, and assisted 868 nursing facility residents in applying for home and community-based services.

In addition to the changes noted above, CMS implemented a new Minimum Data Set (MDS) assessment for all nursing facility residents on October 1, 2010. As part of the revised MDS 3.0 assessment instrument, Section Q requires nursing facility staff to ask residents if they would like additional information about returning to the community. CMS created a new requirement that states must create a Local Contact Agency (LCA) responsible for responding to requests for information about community living based on the responses to the MDS 3.0 Section Q. To respond to this new requirement, the MFP demonstration has agreed to accept and respond to Section Q referrals by providing program education to all interested nursing facility residents, regardless of Medicaid eligibility or payment source. Since its implementation on October 1, 2010, the MFP demonstration has received and responded to 163 referrals including 95 referrals for individuals who are not eligible for Medicaid.

The MFP demonstration has offered a variety of training to transitional case managers in an effort to improve the transition process. Two full-day training sessions on affordable and accessible housing and three days of training in person-centered planning were conducted in 2010. Three additional days of housing training are planned for 2011. Technical assistance and support in person-centered planning and community resource training sessions are planned for the spring of 2011 as well.

Funding was also provided to the Maryland Department of Aging to further their efforts to develop the website for the Maryland Access Point (MAP). This funding and increased

collaboration between Departments has fostered positive relationships with MAP partners and increased the availability of information about community services and supports. The MAP website launched on December 1, 2010.

Several changes occurred at the federal-level that have impacted the State implementation of the MFP program. The Patient Protection and Affordable Care Act (the Affordable Care Act), Pub. L. No. 111-148, signed on March 23, 2010, included an extension of the MFP Demonstration for an additional 5 years. The law amends section 6071 of the DRA to make the following changes:

1) Extend the MFP Demonstration Program through September 30, 2016, and appropriates an additional funding for each year through 2016. Any remaining MFP appropriation at the end of each year carries over and is available to make grant awards until Federal fiscal year 2016. Any unused portion of a State grant award made in 2016 is available to the State until 2020.


2) Expand the definition of who may be eligible for the demonstration. Under the DRA, only those individuals who resided in a qualified institution for more than 6 months were eligible to participate in the MFP Demonstration Program. Under the Affordable Care Act, individuals that reside in an institution for more than 90 consecutive days are now eligible to participate in the demonstration.

In addition, CMS issued guidance on March 25, 2010 to allow states to request 100% federal administrative claims match on certain administrative activities related to the implementation of the MFP grant. States were required to submit requests to their CMS Project Officer for approval of the 100% reimbursement. The Department submitted a formal request for additional funding to CMS and received approval on April 19, 2010 for an additional \$1,543,457 in federal funds for State fiscal year 2011. These new funds do not require a state match and will support seven (7) new full-time staff and two (2) contractual positions, and three (3) new contracts for training events and supports for consumer stakeholders. This funding also includes \$187,939 for enhanced technology systems for home and community-based service systems and continues an annual \$50,000 of support for the maintenance and expansion of the MAP website. These funds will become an annual part of the MFP grant budget and continue through 2016.

During 2010, the MFP demonstration also received \$397,560 in new grant funds from CMS through the funding opportunity titled *Implementing the Affordable Care Act: Making it Easier for Individuals to Navigate their Health and Long-Term Care through Person-Centered Systems of Information, Counseling, and Access; Funding Opportunity C, Nursing Home Transition and Diversion Programs*. This new grant will fund three(3) MAP sites, Prince George's County, Washington County, and Maintaining Active Citizens (MAC) on the lower shore, to establish a set of best practices for integrating peer supports and to pilot the use of peers to educate nursing facility residents on home and community-based service options. For this grant, peers are older adults, individuals with disabilities, consumers of long-term supports and services, or family members/supporters of long-term care consumers.

Thank you for your consideration of this information. If you have questions or concerns, please contact Wynee Hawk, Director of Governmental Affairs, at (410) 767-6481.

Sincerely,



John M. Colmers
Secretary

cc: John Folkemer
Susan Tucker
Mark Leeds
Tricia Roddy
Wynee Hawk